



THOMAS M. MENINO  
Mayor

## CITY OF BOSTON

### Mayor's Office of Consumer Affairs and Licensing

Boston City Hall, Room 817  
Boston, MA 02201

PATRICIA A. MALONE  
Director

#### **APPLICATION FOR A ONE-TIME CARNIVAL LICENSE**

Date \_\_\_\_\_, 20\_\_\_\_

I hereby request an Entertainment License to operate a carnival consisting of \_\_\_\_\_ adult rides, \_\_\_\_\_ kiddie rides, \_\_\_\_\_ games and \_\_\_\_\_ arcade games. Said carnival will be located at \_\_\_\_\_

Said carnival will take place during the following time(s):

Date \_\_\_\_\_ time \_\_\_\_\_ to \_\_\_\_\_, Date \_\_\_\_\_ time \_\_\_\_\_ to \_\_\_\_\_  
Date \_\_\_\_\_ time \_\_\_\_\_ to \_\_\_\_\_, Date \_\_\_\_\_ time \_\_\_\_\_ to \_\_\_\_\_  
Date \_\_\_\_\_ time \_\_\_\_\_ to \_\_\_\_\_, Date \_\_\_\_\_ time \_\_\_\_\_ to \_\_\_\_\_

#### **MUST HAVE DISTRICT POLICE CAPTAIN SIGN-OFF**

I recommend approval: \_\_\_\_\_ BPD Area \_\_\_\_\_

Is Detail recommended? \_\_\_\_\_ If yes, how many? \_\_\_\_\_

#### **PLEASE PRINT THE FOLLOWING INFORMATION**

##### **CARNIVAL OPERATOR**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Tel: (daytime) \_\_\_\_\_

Signature: \_\_\_\_\_

##### **CARNIVAL SPONSOR**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Tel: (daytime) \_\_\_\_\_

Signature: \_\_\_\_\_

#### **PAYMENT TO BE MADE BY CERTIFIED CHECK OR MONEY ORDER**



1. Is this event being advertised? **Yes** **No**

If yes, where is it being advertised? \_\_\_\_\_

2. Did you sign a lease or an agreement to use the property? **Yes** **No**

If yes, please supply the Division with a copy of such.

3. Who will be the person in charge of the event? \_\_\_\_\_

4. What is your plan for internal security? Who will be in charge of security? How many security personnel will be on duty? How will they be identified? What will be their duties? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

5. You must have insurance coverage for the event. Have you named the sponsoring group as the additionally insured? **Yes** **No** Please provide the Division with a copy of this insurance policy.

6. Your amusement rides must be certified by the Department of Public Safety, Division of Engineering. Please provide a copy of this Certificate to the Division.

7. Copies of the carnival operator's licenses must be on file in the on-site carnival office.

8. Please explain the provision for portable toilets? Also, list number of handicapped toilets. \_\_\_\_\_

9. Who is providing the food for the event? \_\_\_\_\_  
\_\_\_\_\_

10. If you are cooking on-site with propane, sterno or gas, you must obtain open air fire permits from the Boston Fire Department and submit copies of these permits to the Division.

11. Will you be serving alcohol and/or beer & wine at this event? **Yes** **No** If yes, please provide the Division with a copy of this license.

12. Will you be offering any entertainment other than what is being applied for on the front of this application? **Yes** **No** Please explain \_\_\_\_\_  
\_\_\_\_\_

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